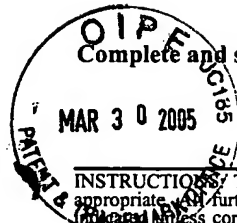


03-31-05

PART B - FEE(S) TRANSMITTAL



Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450  
or Fax (703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate with further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

7590 12/30/2004

DAVID M GRYTE  
HARNESS DICKY & PIERCE P L C  
7700 BONHOMME  
SUITE 400  
CLAYTON, MO 63105

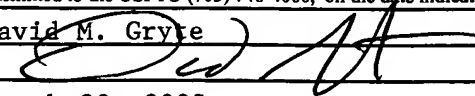
04/01/2005 CNGUYENI 00000045 10717238

01 FC:1501 1400.00 OP  
02 FC:1504 300.00 OP

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

David M. Gryte (Depositor's name)  
 (Signature)  
March 30, 2005 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/717,238	11/19/2003	Peter Ruminiski	3392/OA	6929

TITLE OF INVENTION: LACTONE INTEGRIN ANTAGONISTS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	03/30/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
PATEL, SUDHAKER B	1624	514-183000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). <input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. <input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	<u>Harness, Dickey &amp; Pierce, LLP</u> 1 2 3
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Pharmacia Corporation

St. Louis, Missouri

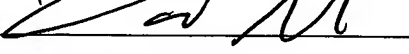
Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed: <input checked="" type="checkbox"/> Issue Fee <input checked="" type="checkbox"/> Publication Fee (No small entity discount permitted) <input type="checkbox"/> Advance Order - # of Copies _____	4b. Payment of Fee(s): <input checked="" type="checkbox"/> A check in the amount of the fee(s) is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input checked="" type="checkbox"/> The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number <u>08-0750</u> (enclose an extra copy of this form).
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5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature   
Typed or printed name David M. Gryte

Date March 30, 2005  
Registration No. 41,809

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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EV 327050556 US

**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

<b>Total Number of Pages in This Submission</b>	<b>3</b>	<b>Application Number</b>	10/717,238
		<b>Filing Date</b>	November 19, 2003
		<b>First Named Inventor</b>	Peter Ruminiski
		<b>Art Unit</b>	1624
		<b>Examiner Name</b>	Sudhaker B. Patel
		<b>Attorney Docket Number</b>	3392/0A/US 31289/USA (6794-000112/US/DVA)

**ENCLOSURES (check all that apply)**

<input checked="" type="checkbox"/> <b>Part B - Fee(s) Transmittal</b> <input checked="" type="checkbox"/> <b>Fee Attached</b> <input type="checkbox"/> <b>Amendment / Reply</b> <input type="checkbox"/> <b>After Final</b> <input type="checkbox"/> <b>Affidavits/declaration(s)</b> <input type="checkbox"/> <b>Extension of Time Request</b> <input type="checkbox"/> <b>Express Abandonment Request</b> <input type="checkbox"/> <b>Information Disclosure Statement</b> <input type="checkbox"/> <b>Certified Copy of Priority Document(s)</b> <input type="checkbox"/> <b>Reply to Missing Parts/ Incomplete Application</b> <input type="checkbox"/> <b>Reply to Missing Parts under 37 CFR1.52 or 1.53</b>	<input type="checkbox"/> <b>Drawing(s)</b> <input type="checkbox"/> <b>Licensing-related Papers</b> <input type="checkbox"/> <b>Petition</b> <input type="checkbox"/> <b>Petition to Convert to a Provisional Application</b> <input type="checkbox"/> <b>Power of Attorney, Revocation Change of Correspondence Address</b> <input type="checkbox"/> <b>Terminal Disclaimer</b> <input type="checkbox"/> <b>Request for Refund</b> <input type="checkbox"/> <b>CD, Number of CD(s) _____</b> <input type="checkbox"/> <b>Landscape Table on CD</b>	<input type="checkbox"/> <b>After Allowance Communication to TC</b> <input type="checkbox"/> <b>Appeal Communication to Board of Appeals and Interferences</b> <input type="checkbox"/> <b>Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)</b> <input type="checkbox"/> <b>Proprietary Information</b> <input type="checkbox"/> <b>Status Letter</b> <input checked="" type="checkbox"/> <b>Other Enclosure(s) (please identify below):</b> <b>Return Receipt Postcard</b>
<b>Remarks</b>		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

<b>Firm</b>	Harness, Dickey & Pierce, P.L.C.		
<b>Signature</b>			
<b>Printed Name</b>	David M. Gryte		
<b>Date</b>	March 30, 2005	<b>Reg. No.</b>	41,809

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

<b>Typed or printed name</b>	David M. Gryte	<b>Express Mail Label No.</b>	EV 327050556 US
<b>Signature</b>		<b>Date</b>	March 30, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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